**Patient Code Number:** date(patient initial)(time of appointment)pnc initials only

ICD 10 Code:

Date patient was seen:

Complaint/Reason patient stated for visit:

Pt. Visit: Follow-up

Site of Visit: HP

**ASSESSMENT:**

***Food/Nutrition-Related Hx*: (Start to do bullet points now.)**

***Food Allergies/Intolerances*: Any? Any changes?**

***Pertinent Meds, include complementary/alternative medicine use:* Any? Any changes?**

***Knowledge/beliefs, food and supplies availability*: Changes since previous visit?**

***Physical activity/exercise:* Brief description from original visit. Any changes?**

***Anthropometric measurements:***

Patient age:

Gender:

Date of birth:

Height:

Weight: lbs. ( kg) (Note if any changes since last visit)

Weight History:

UBW:

IBW:

BMI: 23.2 (normal weight)

BF: not measured

Pt. Wt. Goal:

***Biochemical Data (e.g., electrolytes, glucose), Medical Tests, & Procedures* (only if lab work is provided)**

***Nutrition-Focused Physical Findings (physical appearance, muscle and fat wasting, appetite, and affect):***

(Enter your observations)

***Self-Reported Client Health Hx (Personal hx, medical/health family hx, treatments, including complementary/alternative, & social hx):***

**Additional notes:**

**DIAGNOSIS [To help here, go to our class website, “NCP Planning” or Week 3 of “Weekly Printouts 494/I”.]**

***Intake***

***Clinical***

***Behavioral-Environmental***

***Which domain does this fall into?***

Estimated caloric needs: You must show Mifflin St Jeor Equation calculations, as described in PNC Handbook. Calculate using these formulas:

\**Note: If you did this for the previous visit, and there is no change,* ***state that there is no change from previous visit [site date] – and give the total caloric need. If there is a change, then you must show your recalculation. State what previous need was, and then the new calculations*.**

TEE: Calories from BMR x (?) Activity Factor = calories

BMR: (10 x weight kg) + (6.25 x height cm) – (5 x age) -161

TEE: 1290.25 x (activity level) = kcal/day

Note any adjusted TEE = kcal/day

(Weight goal is )

\*Be sure to adjust TEE for weight goal – either + or – from total TEE calories above.

**PES Statement**

**Problem**: …….. *related to*

**Etiology**: …….. *as evidenced by*

**Signs/Symptoms**: ……..

**Patient is in the (what stage of change?)** [E.g. Preparation: Intends to take action within the next 30 days]

**INTERVENTION**

**Treatment Goals/Expected Outcomes to Address Nutrition Diagnosis**

Patient agrees to try to:



***Interventions*:**

***Recommendations*:**

***Educational material provided***:

***Coordination of Nutrition Care:***

**MONITORING & EVALUATION**

**PNC [RDN] Follow-up plan:**

**Intake**

**Clinical**

**Behavioral**